

# CLAIMS ONLY

SERIAL NO.	FILING DATE
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APPLICANT(S)
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## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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2	/					
3	/					
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47						
48						
49						
50						
TOTAL IND.	3					
TOTAL DEP.	1					
TOTAL CLAIMS	4					

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS